

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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4						
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49		/				
50		/				
TOTAL IND.	←		←		←	
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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53		/				
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TOTAL IND.	←		←		←	
TOTAL DEP.		←		←		←
TOTAL CLAIMS						